

Exhibit 18

Social Security

Program Operations Manual System (POMS)

TN 5 (06-13)

RM 10212.200 Changing Numident Data for Reasons other than Name Change

A. How We Change Numident Data

We only “correct” or “change” information that is on a prior Numident record when there is a documented keying error.

In cases of a keying error, you must review the prior Social Security number (SSN) application; however, do not presume there was a keying error. If you cannot review the prior application, obtain a new application with proper evidence. The individual must submit evidence showing the correct data or information (e.g., a BC to correct an individual’s sex field information) with evidence established before the cycle date on the Numident entry where the keying error was made.

If an individual wishes to update information previously submitted to us, the individual must complete and submit an SSN replacement application with evidence supporting the update, and we will create a new record showing the new data and append it to the prior record(s) on the Numident.

Keying Errors: See Details

- For instructions on date of birth (DOB) changes on the Numident, see RM 10210.295.
- For instructions on correcting a coding error that resulted in an incorrect employment legend on the SSN card, see RM 10215.055.

B. How Do You Create A New Numident Entry To Update Data On The Numident

1. Request evidence

Each individual requesting an update of information on a current Numident record must submit:

- an SSN application for a replacement SSN or card;
- evidence of identity to establish that he or she is the person on the record to whom SSA assigned the SSN; and
- evidence to support the update per the chart in RM 10212.200B.2 in this section.

2. Obtain documentation

Use this table to determine the supporting documentation required for requested updates to the Numident and any additional actions needed.

NOTE: These procedures apply to updates only. In cases of keying errors, see the instructions in RM 10212.200A in this section.

For this update	Obtain this supporting documentation and follow any additional instructions
Sex field	<p>Accept any of the following:</p> <ul style="list-style-type: none"> • full-validity, 10-year U.S. passport with the new sex <p>NOTE: Do not accept passports with less than ten years of validity.;</p> <ul style="list-style-type: none"> • State-issued amended BC with the new sex; • court order directing legal recognition of change of sex;

For this update	Obtain this supporting documentation and follow any additional instructions
	<ul style="list-style-type: none"> • medical certification of appropriate clinical treatment for gender transition in the form of an original signed statement from a licensed physician (i.e., a Doctor of Medicine (M.D.) or Doctor of Osteopathy (D.O.)). The statement must include the following: <p>physician's full name;</p> <p>medical license or certificate number;</p> <p>issuing state, country, or other jurisdiction of medical license or certificate;</p> <p>address and telephone number of the physician;</p> <p>language stating that the individual has had appropriate clinical treatment for gender transition to the new gender (male or female);</p> <p>language stating the physician has either treated the individual in relation to the individual's change in gender or has reviewed and evaluated the medical history of the individual in relation to the individual's change in gender and that the physician has a doctor/patient relationship with the individual;</p> <p>language stating "I declare under penalty of perjury under the laws of the United States that the forgoing is true and correct."</p> <p>NOTE: See RM 10212.200C in this section for a sample letter from a licensed physician that includes all required information to certify to the individual's gender change.</p>

For this update	Obtain this supporting documentation and follow any additional instructions
	<p>IMPORTANT: Surgery is no longer required to change the sex field on the Numident. However, if an individual presents an original or certified letter from a physician stating the individual has undergone sexual reassignment surgery, accept it as evidence to change the sex field when it meets the requirements in GN 00301.030 and contains sufficient biographical data (e.g., name, date of birth) to clearly identify the individual.</p> <p>NOTE: In some cases an individual's sex may impact eligibility for benefits dependent upon spousal relationships. To make title II entitlement or title XVI eligibility determinations dependent upon marriage, follow the instructions in GN 00305.005B. Do not use sex field data on SSA records to make marital status determinations.</p>
Date of birth field	See Date of Birth Change on the Numident, in RM 10210.295.
Place of birth (PLB) field	<ul style="list-style-type: none"> • U.S. born: a BC • foreign born: an acceptable document such as a BC or an acceptable proof of age document listed in kinds of documents that establish age for an SSN card in RM 10210.265, provided the document also list the individual's PLB.

For this update	Obtain this supporting documentation and follow any additional instructions
Citizenship field	<p data-bbox="609 222 997 258">Evidence of U.S. citizenship:</p> <ul data-bbox="609 331 1429 1052" style="list-style-type: none"><li data-bbox="609 331 1429 562">• U.S. public birth record showing birth in one of the 50 U.S. states, the District of Columbia, American Samoa, Puerto Rico, Guam, the Virgin Islands of the U.S. (on or after 01/17/1917), or the Northern Mariana Islands (on or after 11/04/1986 (NMI Local time),<li data-bbox="609 636 846 672">• U.S. passport,<li data-bbox="609 745 1049 781">• Certificate of Naturalization,<li data-bbox="609 854 1044 890">• Certificate of Citizenship, or<li data-bbox="609 963 1360 1052">• Other documents listed in RM 10210.505, RM 10210.510, RM 10210.520, and RM 10210.525. <p data-bbox="609 1125 1438 1451">Interviewers should request and obtain from the individual, the U.S. citizenship document with the highest evidence level available (i.e., the document exists or the individual can obtain the U.S. document within 10 working days) before accepting a document of a lower level. You may use primary, secondary, third-level, or fourth-level evidence to change the citizenship data on a Numident record.</p> <p data-bbox="609 1493 1443 1724">EXAMPLE: If primary evidence of U.S. citizenship is not available (does not exist or the individual cannot obtain the primary evidence in 10 working days), then the interviewer may accept secondary evidence to change the citizenship data on the Numident record.</p>

For this update	Obtain this supporting documentation and follow any additional instructions
Parent's name field	<ul style="list-style-type: none"> • original or amended BC, or • final adoption decree issue by the court or court determination of paternity

3. Process the request

If you change the sex code on the Numident, and the individual is:

- receiving Social Security benefits,
- receiving Supplemental Security Income (SSI) payments, or
- a representative payee for his or her child,

change the sex immediately if it is different on the Master Benefit Record (MBR), the Supplemental Security Record (SSR), or in the Representative Payee System (RPS) to agree with the Numident. List all documents or evidence submitted to change the individual's sex code on the Social Security Number Application Process (SSNAP) Summary screen.

NOTE: For instructions on determining whether a valid marital relationship exists, see GN 00305.005B.

When changing a parent's name on a child's Numident record, ask the parent if he or she is a title II beneficiary, an SSI recipient, or a representative payee. If so, review the MBR, SSR, or RPS record and initiate or complete actions necessary to update the record (e.g., correcting a parent's name on the SSR record or ensuring that actions are taken to complete a new representative payee application).

In the "Remarks" block on the SSNAP Summary screen, list any evidence or documents the individual submitted to change the following fields on the Numident, if not previously captured in SSNAP:

- sex field, or
- PLB field, or
- parent's name field.

4. When to suppress an SSN card

Process the requested change but **suppress** the issuance of a replacement SSN card when the correction will not affect any data on the face of the SSN card (i.e., changes to the sex, DOB, PLB, or parent's name fields on the Numident) **and** the individual is still in possession of the SSN card showing the correct information.

5. When to send written notice

Send a written notice if you are unable to provide an individual with an original or replacement SSN or card. Follow the appropriate instructions in:

- RM 00299.020 Form SSA-L676 – Refusal to Process SSN Application, or
- RM 10205.090 Form SS-5 Received and Additional Documentation is Needed, or
- RM 10215.110 Policy on Providing Written Notice and Second Review When SSN or Card May Not Be Issued, or
- RM 10215.115 Procedures for Providing Written Notice to an SSN Applicant.

See Details:

- RM 10210.265 Kinds of Documents that Establish Age for an SSN Card
- RM 10210.295 Date of Birth Change on the Numident
- RM 10210.505 Primary Level Evidence of U.S. Citizenship
- RM 10210.510 Secondary Level Evidence of U.S. Citizenship for a U.S. Born Applicant

- RM 10210.520 Third Level Evidence of U.S. Citizenship for a U.S. Born Applicant
- RM 10210.525 Fourth Level Evidence of U.S. Citizenship for a U.S. Born Applicant
- RM 10215.055 Correct a Coding Error that Resulted in an Incorrect Employment Legend on the SSN Card
- RM 10220.210 Evidence Requirements for Documentation of Harassment, Abuse, or Life Endangerment (HALE)
- GN 00301.030 Acceptability of Documentary Evidence
- GN 00301.080 Certification by Custodian of the Record
- GN 00301.045 Validity of Documents

C. Exhibit – Sample Letter From Licensed Physician Certifying To The Individual's Gender Change

(Physician's Address and Telephone Number)

I, (physician's full name), (physician's medical license or certificate number), (issuing U.S. State/Foreign Country of medical license/certificate), am the physician of (name of patient), with whom I have a doctor/patient relationship and whom I have treated (or with whom I have a doctor/patient relationship and whose medical history I have reviewed and evaluated).

(Name of patient) has had appropriate clinical treatment for gender transition to the new gender (specify new gender, male or female).

I declare under penalty of perjury under the laws of the United States that the forgoing is true and correct.

Signature of Physician

Typed Name of Physician

Date

To Link to this section - Use this URL:

<http://policy.ssa.gov/poms.nsf/lnx/0110212200>

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